

Overview

Method Name

Immunoassay (IA)

NY State Available

Yes

Specimen

Specimen Type

CSF

Specimen Required

Submit 1 mL of spinal fluid (CSF). Send refrigerate in a plastic vial.

Specimen Minimum Volume

0.25 mL

Reject Due To

Hemolysis	NA
Lipemia	NA
Icterus	NA
Other	NA

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
CSF	Refrigerated (preferred)	7 days	
	Frozen	180 days	
	Ambient	72 hours	

Clinical & Interpretive

Reference Values

Reference Range: Not Established

Units: ug/mL

Performance

PDF Report

No

Day(s) Performed

Monday through Sunday

Report Available

1 to 5 days

Performing Laboratory Location

Medtox Laboratories, Inc.

Fees & Codes

Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

CPT Code Information

80170

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
FGENT	Gentamicin, CSF	13561-6

Result ID	Test Result Name	Result LOINC® Value
Z3321	Gentamicin	13561-6